



Consumer Complaint Form

CPA.....

1. Action taken by the complainant prior to lodging the complaint

Respondent Informed: Yes/No

What has been the
response.....
.....

Law suit filed: Yes/No

(If yes provide details)

Authority Contacted:
.....

Any other action:.....
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Parties

2. Complainant 1

Full Name:.....

Marital Status: Ms/Mr/Mrs.....

NIN Number: Age: Gender:.....

Home Address:.....

Work Address:.....

Contact Number: Home..... Work:..... Mobile:

Email Address:.....

Any other relevant Details:.....

Complainant 2

Full Name:

Marital Status: Ms/Mr/Mrs

NIN Number:..... Age: Gender:.....

Home Address:

Work Address:

Contact Number: Home..... Work:..... Mobile :

Email Address:.....

Any other relevant Details:.....

Are you filling this complaint on behalf of someone else? Yes No

*If yes, please provide the relevant information relating to the person on behalf of whom you are filing this complaint + an authorization letter to do so (or power of attorney).

Full Name:

Marital Status: Ms/Mr/Mrs.....

NIN Number: Age: Gender:.....

Home Address:

Work Address:

Occupation:

Contact Number: Home..... Work:..... Mobile :

Email Address:.....

Any other relevant Details:.....

3. Do you intend to involve a third party, such as an attorney or other legal representatives, during the investigation of the complaint: Yes/No

4. Respondent

Full Name:

(includes Business, Sole Trader, partnership or Company Name)

Name of person dealt with:.....

Business Activity:.....

Business Address:

Contact Number:

Email address:.....

Any other relevant Details:

5. Description of Complaint

Type of complaint lodged Services (refer to a.) Goods (refer to b.)

a. Type of Service:.....

Date the Service was acquired:.....

Date for completion of service:.....

District where the service was rendered:Region:

Total cost of the Service:

Total Amount paid for the service:.....

Method of payment:.....

Currency:

Delay in the performance of the service Yes/No?

If yes, how long.....

Defects /Poor performance of service Yes/No?

Defects with the goods used to render the service: Yes/No

Has there been any physical damage or loss of property during the rendering of the service?

Yes/No

Was a receipt provided: Yes/ No

Complaint :

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b. Type of Goods:

Category:.....

Product:.....

Model:.....

Serial NO:.....

Date of Goods purchase:.....

Amount Paid:.....

Currency:.....

Payment Method:.....

District Goods was bought: Region:

Warranty: Yes/No

Period:.....

Was a receipt provided: Yes/ No

Product not in conformity with order: Yes/ No

Defective product: Yes/ No

Delay in delivering product: Yes/ No

Complaint :

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A series of 20 horizontal dotted lines for writing.

6. Evidence:

- Receipts Commencement Notice
- Building plans Contract
- Stop Notice Title Deed
- Photo Invoice/Quotation
- ID Card Contract

Any other relevant documents not featured above.....

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7. Exhibit¹

8. Other observations²

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9. Remedy Requested

- Refund Remedy the defects
- Repair Replace Perform services

¹ (Refer to Exhibit form)

² As guidance: Bait Advertising, False Representations, Dishonestly accepting payment etc.....

Statement of Declaration

Section 52, Fair Trading Commission 2009 states:

“A person who gives to the Commission or any authorised officer any information which he or she knows to be false or misleading commits an offence and is liable to a fine not exceeding 100, 000 rupees or to imprisonment for a term not exceeding 2 years or to both”.

I, the undersigned warrant that the information given in this complaint is true, accurate and complete to the best of my knowledge, that the attached copies of documents are unabridged, that all estimates are identified as such and submitted to the best of my knowledge of the facts of the case, and where an opinion is stated, such opinion is stated in good faith”.

Complainant’s Name:.....

Complainant’s Signature:.....

Date:

Receiving Officer’s Name:.....

Officer’s Signature:.....

Date: